FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEC

FORM D

OMB APPROVAL OMB Number: 3235-0076 April 30, 2008 Expires: Estimated average burden hours per response16.00

Mail Processing Section

HILL JE FIGA

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY Prefix Serial DATE RECEIVED

Washington, DC

7000	
Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Change in certain terms of the Series A Preferred Shares	
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE Type of Filing: [X] New Filing [] Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	08046327
Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) Club Holdings, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021	Telephone Number (Including Area Code) 303-901-0737
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from	Telephone Number (Including Area Code)
Executive Offices)	PROCESSED
Brief Description of Business Luxury destination membership club.	APR 282008
Type of Business Organization [] corporation [] limited partnership, already formed [] business trust [] limited partnership, to be formed [X] other (please specify): limited liability or [X	ompany, already form THOMSON REUTERS
Actual or Estimated Date of Incorporation or Organization:	Month Year [0 1] [0 4] [X] Actual [] Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada: EN for other foreign jurisdiction) [D.J.E.]	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- · Each promoter of the issuer, if the issuer has been organized within the past five years;
- · Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- · Each general and managing partner of partnership issuer.

Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Addoms, Ben
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Allsup, Len
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Anderson, Charles
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Anderson, Scott
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [X] General and/or Managing Partner
Full Name (Last name first, if individual) Barnet, Bruce
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [X] General and/or Managing Partner
Full Name (Last name first, if individual) Estler, Pete
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Fitchey, Carey
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021
Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Kerchof, Don
Business or Residence Address (Number and Street, City, State, Zip Code)
11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021
Check Box(es) that Apply: [] Promoter [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Lubner, Ronnie
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021

A. BASIC IDENTIFICATION DATA (continued)

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuer.

Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) McCarthy, Kevin
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Mesikapp, Kenneth
Business or Residence Address (Number and Street, City, State, Zip Code)
11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Mullins, L. Keith
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Preiser, Alex
Business or Residence Address (Number and Street, City, State, Zip Code) 11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Short, Karen
Business or Residence Address (Number and Street, City, State, Zip Code)
11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021 Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner
Check box(es) that Apply: [A] Frontoice [] Beneficial Owner [A] Executive Officer [] Director [] Octional and of Managing Fault.
Full Name (Last name first, if individual)
Sutton, Trent
Business or Residence Address (Number and Street, City, State, Zip Code)
11101 W. 120th Avenue, Suite 300, Broomfield, CO 80021
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Wetherell, David S.
Business or Residence Address (Number and Street, City, State, Zip Code)

A. BASIC IDENTIFICATION DATA (continued)

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuer.

Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if i Berg & Berg Enterprises, LLC	ndividual)				· · · · · · · · · · · · · · · · · · ·
Business or Residence Address 10050 Bandley Drive, Cupertir	`	eet, City, State, Zip Code	·)		
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if i Greenwoods Capital Partners I,	•				
Business or Residence Address 245 Fifth Avenue, 25th Floor, I	1	, ,, ,	2)	·	
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if i Kittredge Private Holdings, LP					
Business or Residence Address 222 El Brillo Way, Palm Beach	`	reet, City, State, Zip Code	:)		
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if i Monogram Management, LLC Business or Residence Address		City State 7:- Code			
11101 W. 120th Avenue, Suite	300, Broomfield,	CO 80021			
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if i Scorpion Capital Partners LP				· · · ·	
Business or Residence Address 245 Fifth Avenue, 25th Floor, I	•		:)		

				B. IN	ORMAT	ION ABC	UT OFF	ERING						
1. Has the issuer so	old, or does th	e issuer inte	nd to sell, to	non-accrec	dited investo	ors in this of	Tering?				• • • • • • • • • • • • • • • • • • • •			s No [X]
				Answer also	in Append	ix, Column	2, if filing u	ınder ULOI	Ē.					
2. What is the mini	mum investr	ent that will	l be accepted	d from any	individual?.								\$	N/A
2 . D			- e i i i	:-0										s No
Does the offerin			_										Į A] []
 Enter the inform solicitation of puregistered with t of such a broker 	irchasers in co he SEC and/o	onnection w	ith sales of s e or states, I	securities in ist the name	the offering of the brok	g. If a perso er or dealer	n to be liste . If more th	d is an asso	ciated perso	n or agent o	of a broker o	or dealer		
Full Name (Last nar	ne first, if ind	ividual)												
Business or Residen	ce Address (N	lumber and	Street, City,	State, Zip	Code)									
Name of Associated	Broker or De	aler									<u></u>			
States in Which Pers (Check "All State	son Listed Ha es" or check i	s Solicited o ndividual St	or Intends to	Solicit Pure	chasers							[} All	States
[AL] (IL) (MT) (RI)	[AK] (IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Name (Last nar			. ,	. ,		• •	• •				. ,	. ,		
Business or Residen	ce Address (N	lumber and	Street, City,	State, Zip	Code)									
Name of Associated	Broker or De	aler		<u>.</u>			<u> </u>							
States in Which Pers (Check "All Stat												[] All	States
(AL) (IL) (MT) (RI)	[IN]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Name (Last nar	ne first, if ind	ividual)												
Business or Residen	ce Address (N	lumber and	Street, City,	State, Zip	Code)			, 						
Name of Associated	Broker or De	aler		<u>-</u> -										
States in Which Pers												.,,,,, 1	1 All	States
· [AL]	[AK]	[AZ]	[AR]	[CA]	[CO]							•	,	J
(AL) (IL) (MT) (RI)	[AK] [IN] [NE] [SC]	[AZ.] [IA] [NV] [SD]	[KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Aggregate Type of Security Offering Price Already Sold Debt \$ 515,000 515,000 Equity [] Common [X] Preferred Convertible Securities (including warrants) Partnership Interests Other (Specify) \$ 515,000 \$ 515,000 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number Investors of Purchases Accredited Investors 515,000 Non-accredited Investors 0 \$ Total (for filings under Rule 504 only) \$ Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C--Question 1. Dollar Amount Type of Type of Offering Security Sold Rule 505 Regulation A Rule 504 a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering, Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees [] Printing and Engraving Costs [] Legal Fees Accounting Fees []**Engineering Fees** [] Sales Commissions (specify finders' fees separately) [] Other Expenses (identify) Form D Filing Fees [X] 300 Total [X] 300

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE C	TROCEEL			
	b. Enter the difference between the aggregate offering price given in response to Part CQuestion 1 and total e furnished in response to Part CQuestion 4.a. This difference is the "adjusted gross proceeds to the issuer"				······································	\$ <u>514,700</u>
5 .	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C—Question 4.	ate. Th	e total of the			
			Payments Officers Directors Affiliate	s, : &	P	ayments to Others
	Salaries and fees	[]			s	
	Purchase of real estate	[]	\$	[]	s_	
	Purchase, rental or leasing and installation of machinery and equipment	[]	\$	[]	s	
	Construction or leasing of plant buildings and facilities	[]	\$	[]	s	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]	s	[]	s	
	Repayment of indebtedness	[]	\$	[]	s _	
	Working capital	[]	\$	(x)	s _	514,700
	Other (specify):	_				
		_ []	s	[]	\$	
	Column Totals	[]	s	[X]	s _	514,700
	Total Payments Listed (column totals added)		[X] \$_	514,700		
	D. FEDERAL SIGNATURE					
ınd	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed understaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff-accredited investor pursuant to paragraph (b)(2) of Rule 502.	nder Ru f, the inf	le 505, the follo- ormation furnish	wing signature ned by the issue	constituer to any	ites an
Cl	ner (Print or Type) ub Holdings, LLC		Date April 5 , 200	8		
	ne of Signer (Print or Type) Rex Preiser Title of Signer (Print or Type) General Counsel and Senior Vice Presi	dent				

END

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)